SOUVENIR

World Heart Day

25th September 2005, NEW DELHI

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Let it beat!

Organised by

ALL INDIA HEART FOUNDATION

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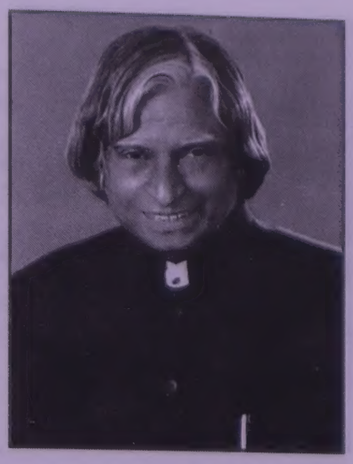

MESSAGE

I am happy to know that the All India Heart Foundation is bringing out a souvenir on the occasion of "World Heart Day" on the theme 'Healthy Weight, Healthy Shape' on September 25, 2005.

The problems of overweight and obesity have led to a growing epidemic of heart diseases in certain sections of society. Lifestyle intervention such as regular physical activity and a healthy diet can reduce the risk of these common and often fatal diseases. Public awareness on the benefits of exercise especially amongst the urban population is needed. The Foundation should co-ordinate with hospitals to take proactive steps to counsel people on the need for change in food habits.

I extend my greetings to all those associated with the Foundation and wish the Day all success.

(A.P.J. Abdul Kalam)

New Delhi
August 26, 2005

सत्यमेव जयते

Prime Minister
प्रधानमंत्री

MESSAGE

I am happy to know that All India Heart Foundation is observing 'World Heart Day' in September 2005.

It is estimated that in India about 8 lakh people die from coronary heart diseases (CHD) and more than 6 lakh from stroke. Surveys in India reveal that 10-15% of adults suffer from hypertension. In recent times an increasing trend in Cardio-Vascular Diseases (CVD) has been witnessed which has become the leading cause of deaths from non-communicable diseases.

The cost of interventions required are often very expensive. Thus preventive action becomes essential. At the same time, cost effective technology required for the early diagnostic and therapeutic interventions must be developed and made available for use at all levels of health care. Health Promotion interventions e.g. avoiding stress, tobacco and alcohol, decreased use of salt and sugar, increased consumption of fruits and vegetables and regular exercises are quite helpful in avoiding heart diseases and therefore should be adopted by everybody.

I convey my best wishes on the occasion.

Manmohan Singh

(Manmohan Singh)

New Delhi
September 19, 2005

World Health Organization
REGIONAL OFFICE FOR South-East Asia
Mahatma Gandhi Marg, Indraprastha Estate, New Delhi-110 002
Tel: 91-11-23370804, Fax: 91-11-23370197, www.whosea.org

WORLD HEART DAY 2005

Message From Dr Samlee Plianbangchang

Regional Director, WHO South-East Asia Region

Chronic conditions, including heart disease are among the major global health problems. They constitute a key barrier to development in many countries. While death rates due to heart disease are decreasing in some parts of the world, countries of the South-East Asia Region remain in the grip of mortality due to this disease. Epidemiological evidence shows clearly that unhealthy diet, physical inactivity and tobacco use are the major causes of premature deaths due to cardiovascular disease.

It is well known that risk factor reduction at community and population level leads to an appreciable reduction in morbidity and mortality due to heart disease. Population-wide approaches focusing on health promotion and risk reduction bring huge benefits to public health. To be effective, these approaches have to involve multiple stakeholders and result in sustainable change of psycho-social, economic and biological determinants of ill-health. The knowledge on how to control and prevent heart disease exists. Building advocacy, skills and commitment to use this knowledge in the most cost-effective manner is among the major challenges for national health authorities and international partners, including the World Health Organization.

India and other developing countries, while still facing enormous problems of under-nutrition and at the same time, increasingly confronted with problems relating to the other extreme of nutritional status. Obesity and over-weight are becoming more and more visible in many urban populations, including the underserved, women and children. A global pandemic of obesity seems to occur in many parts of the world, the South-East Asia Region is no exception. To address this and other problems related to chronic and noncommunicable diseases, WHO has recently adopted the Global Strategy on Diet, Physical Activity and Health. Regional and national action plans to implement this strategy are being developed.

The global, regional and national networks of governmental and non-governmental agencies, including World Heart Federation and its national members, such as All India Heart Foundation and the Cardiological Society of India, have a very important role to play in creating public awareness and building political commitment to promote "Healthy Weight and Healthy Shape" which is the theme of the World Heart Day this year.

On the occasion of World Heart Day 2005, I wish all stakeholders and partners successful endeavours in controlling and preventing heart disease.

Samlee Plianbangchang

Samlee Plianbangchang, M.D., Dr.P.H.

Minister of Health & Family Welfare
Government of India
Nirman Bhavan, New Delhi 110 011

स्वास्थ्य एवं परिवार कल्याण मंत्री
भारत सरकार,
निर्माण भवन, नई दिल्ली - 110 011

सत्यमेव जयते

डॉ. अन्बुमणी रामदास
Dr. Anbumani Ramadoss

15th July 2005

MESSAGE

I am happy to learn that the All India Heart Foundation, New Delhi is bringing out a Souvenir on the occasion of 'World Heart Day' on 25th September 2005.

A worldwide epidemic of overweight and obesity due to fatty diet, a decrease in physical activity and increased tobacco consumption are forewarning of the rapidly growing epidemic of heart disease and stroke. Many of the heart diseases are preventable and the importance of preventive measures particularly in the case of low and middle-income people of India, who can ill-afford the increasing cost of medicinal care, cannot be over stressed.

I am sure the Souvenir will include articles to create awareness of people to achieve a longer and better life through prevention and control of heart disease and stroke.

I wish the Souvenir all success.

(Dr. Anbumani Ramadoss)

सत्यमेव जयते

Govt. Of National Capital Territory of Delhi
Delhi Secretariat, I.P. Estate,
New Delhi 110 002

D.O. No. OSDCMI/278
Dated : 16.09.05

SHEILA DIKSHIT
Chief Minister

MESSAGE

It gives me immense pleasure to know that a special souvenir is being brought out on the occasion of 'World Heart Day' on 25th September, 2005.

The theme of this year "Healthy Weight, Healthy Shape" is much relevant today. I hope the All India Heart Foundation and the Cardiological Society of India would strive hard to disseminate the possible measures to control obesity which becomes cause of many diseases.

My best wishes for successful publication of special souvenir.

Sheila Dikshit

(Sheila Dikshit)

सत्यमेव जयते

Minister of Finance, Planning,
Urban Development, PWD
Govt. of National Capital Territory of Delhi
Delhi Secretariat, I.P. Estate, New Delhi 110 002

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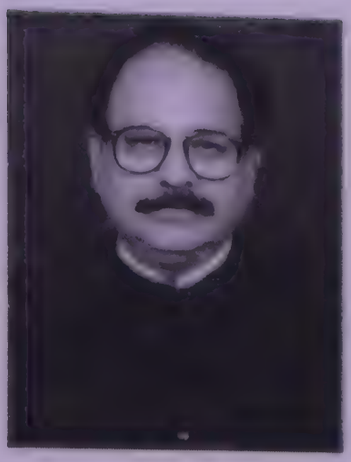

D.O.No. : FM/2005/RO13766
Date : 01/09/05

डा० अशोक कुमार वालिया
Dr. Ashok Kumar Walia

MESSAGE

It gives me a great pleasure to know that All India Heart Foundation, New Delhi is bringing out a Souvenir on the occasion of World Heart Day on September 25, 2005, and the theme for this year is "Healthy Weight, Healthy Shape".

Heart is at risk not only by the amount of body fat but also where the fat is located. Abdominal obesity, measured by waist circumference, is an easy marker of cardiovascular risk. Being overweight or obese particularly if the weight is carried around the abdomen is a leading risk factor for heart disease and stroke, reducing the likely age of first heart attack by between four and eight years.

Maintaining a healthy weight and shape will dramatically reduce the risk of developing heart disease and stroke. Many of the heart diseases are preventable and the importance of preventive measures particularly in the case of low and middle-income people of India, who can ill-afford the increasing cost of medical care cannot be over stressed.

I am sure the Souvenir will include articles to create awareness of people to achieve a longer and better life through preventive measures.

I am confident that deliberations on the occasion of World Heart Day would create awareness among people to avoid junk food and take regular exercise.

I wish the organizers all the success in their noble mission.

(Dr. A.K. Walia)

सत्यमेव जयते

Minister of Health & Social Welfare
Govt. of NCT of Delhi
स्वास्थ्य एवं समाज़ कल्याण मंत्री
राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार

D.O.No. MOHSW/05/A5404
Date : 26/7/05

डा. योगानंद शास्त्री
Dr. Yoganand Shastri

MESSAGE

It gives me immense pleasure to learn that All India Heart Foundation is observing World Heart Day on the theme of "Healthy Weight, Healthy Shape" on Sunday 25th September, 2005 and is also bringing out its souvenir on this occasion.

I am also happy to learn that the initiative taken by the Foundation to educate the people about a world-wide health problem of overweight and obesity due to unbalanced diet, which leads to decrease in physical activity. Increasing trend of tobacco consumption is forewarning of the rapidly growing of heart diseases.

It will be appropriate to give more importance to take preventive measures and to create awareness among the people particularly the people of low and middle income group of India.

I congratulate the Members of the All India Heart Foundation and wish them success in this venture.

(Dr. Yoganand Shastri)

MORNING SESSION

At Shantivan

The Crowd at Shantivan

Dr A.K. Walia being received at Shantivan

Flagging off the walk

A view of the crowd at Shantivan

Prizes from Cornola being distributed

AFTERNOON SESSION

Dr Davison Monodawafa addressing the audience

Dr & Mrs Monodawafa with Dr. S. Padmavati

Drs. H.K. Chopra, S. Padmavati,
Prema Ramachandran & H.P.S. Sachdev at the I.I.C

The audience at the I.I.C. Dr. H.P.S. Sachdev addressing the meeting

FOREWORD

S. Padmavati

The sixth World Heart Day has come and gone. With each passing year, the enthusiasm for the event seems to increase in Delhi. The walkathon in the morning was flagged off by Dr. A.K.Walia, Finance Minister, Delhi followed by a dialogue with the public as described by Dr. A.S.Dave elsewhere in this brochure. The afternoon session, also with public participation was at the India International Centre. In the unavoidable absence of Chief Guest Dr. Samlee Plianbangchang, Regional Director, World Health Organisation, his message was read out by Prof. Davison Munodawafa, Regional Adviser, Health Promotion and Education, World Health Organisation, SEARO who also participated in the discussions. Two short presentations relevant to this year 's theme were made. The first by Dr. H.P.S.Sachdev Prof of Pediatrics and Epidemiology, Maulana Azad Medical College was on 'Start Early to Stay Healthy'. The second on 'Body Size, Shape and Health' was by Dr. Prema Ramachandran, Director, Nutrition Foundation of India. A panel discussion followed with Dr. H.K.Arora, Secretary, Cardiological Society of India (Delhi Branch), Dr. Vinod Sharma, Cardiologist, National Heart Institute and Dr. A.S.Dave, Consultant, Shantimukund Hospital as panelists. The lecture hall was packed and there was standing room only. There was a very lively discussion with the audience asking many questions. The session showed beyond doubt the increasing interest in matters of health especially heart health in the Delhi public. The newspapers carried the accounts of these events in both English and Hindi dailies. The afternoon session was sponsored by M/s Imprimis Life, PR (P) Ltd. A subsidiary of the Almond Society of California. As in past years a Souvenir is being published with messages, the main presentations and other articles relevant to this year's theme.

We expect an even bigger turn out in the years to come.

Inaugural Function at Shantivan New Delhi, 6th World Heart Day (September 25,2005)

REPORT BY DR. A.S.DAVE

On Sunday the 25th September 2005, the inaugural function to mark the 6th World Heart Day was organized at the sprawling Shantivan where nearly 1000 people had collected. The function was organized jointly by All India Heart Foundation and Cardiological Society of India(Delhi Branch). M/s Siel Ltd., manufacturers of Cornola Refined Oil sponsored the function for the sixth consecutive time. Morning walkers started arriving from 6.00 A.M. onwards. Dr. S.Padmavati, President All India Heart Foundation arrived at 6.45 A.M., Dr. A.K.Walia, Minister for Finance, Planning and Urban Development, Govt. of NCT Delhi arrived around 7.00 A.M. The Chief Guest Hon'ble Ms. Sheila Dikshit, Chief Minister of NCT of Delhi could not make it on account of some preoccupation. However, she was gracious enough to send flowers and good wishes on the occasion.

Dr. A.S.Dave started the proceedings of the day with the recitation of a prayer, meaning:

Let every one be happy and prosperous,
Let every one be free from any sickness,
Let every one be beautiful and appealing to all,
Let no one suffer from sorrow,

After welcoming morning walkers and guests, Dr. A.S.Dave briefly introduced Dr. S.Padmavati, President of AIHF, Dr. Vinod Sharma and Dr. Lokesh Gupta both Senior Cardiologists from National Heart Institute. After Dr. Dave's brief introduction Dr. Padmavati addressed the gathering. She introduced the theme for 6th World Heart Day "Healthy weight, Healthy shape". She told the gathering the importance of keeping weight under control. She emphasized that the best way for knowing correct body weight is by measuring BMI (Body Mass Index). She stated that for men waist should be 37inches or below and for women it should be 32 inches or below. The incidence of heart attack increases significantly when

abdominal girth exceeds 37 inches for men and 32 inches for women. She further stated that it is important to know waist hip ratio. When waist hip ratio is more than 1 in men and more than 0.85 in women the risk of diabetes mellitus, stroke, coronary artery disease increases significantly. People with "apple" shaped obesity carry more risk than those with "pear" shaped obesity.

After Dr. Padmavati's address, Mr. A.K.Mehra, Director Siel Ltd., welcomed Dr. A.K.Walia and the gathering. He stated that his organization was very happy to sponsor the function which was for a very good cause.

Thereafter, Dr.A.S.Dave again addressed the gathering. He told the gathering how to calculate the Ideal Body Weight (IBW)

Ideal Body Weight (IBW):

(I) Height in Centimeters minus 100=IBW in Kg.
(II) Body Mass Index(BMI)=Weight(Kg) divided by Height in meter^2

(a) Normal BMI is defined as 18.5 to 24.9 kg/m^2
(b) Overweight is defined as BMI-25 to 29.9 Kg/m^2
(c) Class I Obesity-BMI=30 to 34.9 kg/m^2
(d) Class II Obesity-BMI=35 to 39.9 kg.m^2
(e) Class III(Extreme) obesity-BMI>40 kg/m^2

You should keep your BMI below 25. Above 30 is being obese. DO NOT allow your BMI to touch 30

Though not fit for scientific studies but in day to day practice people can calculate their IBW in the following manner.

For height of 5 feet allow 55 kg, add 2 kg for every additional one inch height;
For e.g. if someone's height is 5'-8", his IBW would be 55 kg + 16 kg = 71 Kg.

He also told how to calculate calories required per day as mentioned below:

Calorie Requirement Per Day:

Once you know your IBW it is easy to calculate your calorie requirement.

-If you are overweight you should consume 20 cal/kg IBW/day.

-If you are of IBW you should consume 30 cal/kg IBW/day

-If you are Underweight you should consume 35 to 40 cal/kg IBW/day.

Depending on the nature of work, whether it is heavy or sedentary, one should add or subtract 5 to 10 cal/kg/day. A person requires 10% less than the total calories/day recommended for his weight for each decade above the age of 50 years.

After telling as to how to know the IBW, he conducted short quiz & posed few questions to ladies and children pertaining to diet and exercise, and in the process he told the gathering about calorific value of various food items. He warned that cold drinks, junk food, fried food, sweets & icecream should be consumed only sparingly. He emphasized the need for taking green vegetables, salads, fruits and high fibre diet. After quiz, question and answer session started. Audience was very enthusiastic and large number of questions were asked. Answers were given by Dr. Padmavati, Dr. A.S.Dave, Dr. Vinod Sharma and Dr.Lokesh Gupta.

Dr. Vinod Sharma stated that they are conducting a research project in a public school and preliminary results show that nearly 27% of the students are obese and nearly 2% of the students are even hypertensive.

After question answer session Dr. A.K.Walia addressed the gathering. He emphasized the need for regular exercise, including yoga . Around 8.15 AM Dr. A.K.Walia flagged off walk from Shantivan to Rajghat. Cornola distributed nearly 30 prizes for the lucky draw and prizes were also given to those who answered the questions correctly during quiz time. Arrangements were made for free blood sugar and B.P.check up by M/s A R and Health Care Pvt. Ltd. which was used by a large number of people. Cornola refined oil had made elaborate arrangements for breakfast for the entire gathering which they all enjoyed.

Dr. A.S.Dave thanked the Cornola refined oil and others associated with the function for making the 6th World Heart Day a great success.

WORLD HEART DAY 2005

Theme : "Healthy Weight, Healthy Shape"

World Heart Day is run by the World Heart Federation's member organisations in 100 countries under the slogan "A Heart for Life". The aim is to build awareness of the threat of heart disease and stroke and the importance of a heart-healthy lifestyle, so that they can live better, & longer. World Heart Day involves a wide range of educational activities including health checks, walks, runs, jump rope, fitness sessions, public talks, stage shows, scientific forums, exhibitions, concerts, carnivals and sports tournaments.

The World Heart Federation, a Non-Governmental Organisation based in Geneva, Switzerland is committed to helping the global population achieve a longer and better life through prevention and control of heart disease and stroke, with a particular focus on low and middle-income countries. Members of the World Heart Federation includes 186 societies of cardiology and heart foundation from 100 countries.

A worldwide epidemic of overweight and obesity, a decrease in physical activity and increased tobacco consumption, are a forewarning of the rapidly growing epidemic of heart disease and stroke ahead. 17 million people die world wide each year from heart disease and stroke; 80% are from the low and middle income countries, which include India.

World Heart Day has been observed by the All India Heart Foundation since 2000. It is held on the last Sunday in September each year.

The brain-child of Dr. Antonio Bayes D'Luna, Former President of World Heart Federation, World Heart Day was started in 2000 to create

awareness of heart disease and start early preventive measures. The theme for each year has been different Physical Activity (2000), Healthy Life Style (2001), Obesity, Physical Activity & Nutrition (2002), Women, Heart Disease and Stroke (2003) and Children, Adolescents and Heart Disease (2004). The theme for the current year is "Healthy Weight, Healthy Shape".

Heart health is at risk not only by the amount of body fat but also where that fat is located. Abdominal obesity, measured by waist circumference, is any easy marker of cardiovascular risk. Excess abdominal fat is more resistant to the action of insulin. So body shape and specifically a large waist relatively to hip size, or having an apple shape, raises the risk of diabetes, high blood pressure and heart disease. A high risk base waist line is 80 cm (32 inches) for women and 94 cm (37 inches) for men from Europe; 80 cm for women and 90 cm for men from Central and Latin American, the Middle East, India and Asia; 90 cm for women and 85 cm for men for Japan; more than 88 cm for women and 102 cm for men from North America, and 80 cm for women and 94 cm for men from the rest of the world.

What about BMI (Body Mass Index)

BMI is a useful tool to assess health risk, but fat stored around the abdomen measured by waist circumference can indicate a strong risk for diabetes and heart disease regardless of whether you are considered over weight or obese according to BMI.

Why does excess weight in the abdomen increase the risk of heart disease and stroke?

Excess abdominal fat is more resistant to the action of insulin, thereby raising the risk of diabetes, high blood pressure and heart disease. Those

with a large waist relative to hip size body shape, commonly known as having an apple shape, are at greater risk.

What can we do to maintain a healthy weight and shape and reduce the risk of developing heart disease and stroke?

Adopt a healthy lifestyle including:

- Taking more physical exercise: for adults at least 30 minutes of brisk walking a day will help reduce risk.
- Stopping smoking and avoiding smoky environments
- Eating a healthy and balanced diet including plenty of fruits and vegetables, whole grain products, low-fat and fat-free products, unsaturated soft margarines and oils such as sunflower, corn, rape-seed and olive oil, lean meat, fish and pulses is best.

* New studies show that major health benefits come in as little as six weeks.

What's the aim of World Heart Day?

- To increase public awareness of the threat of heart disease and stroke and the importance of a heart-healthy life style, so that children, adolescents and adults all over the world can live better, longer.
- To encourage more and better heart disease and stroke preventive measures around the world
- Under the slogan " A Heart for life", World Heart Day is run by the World Heart Federation's member organizations on all continents.
- Activities on the day include health checks, walks, run, jump rope, fitness sessions, public talks, stage shows, scientific forums, exhibitions, concerts and sports tournaments.

Are you an apple or pear?

Your health is at risk not only by the amount of body fat you have, but also by where the fat is located. You have an apple shape if you tend to gain weight mostly in the waist (stomach) are. Pear shaped figures tend to gain

weight around the hips and buttocks. Apple shapes have an increased risk of heart disease so they need to take extra care to maintain a healthy weight.

Measure your waist, measure your risks

Measures your waist just above your navel. This is throughout to be a better indicator of risk then BMI and is a simple and practical way to identify people at risk.

Body Mass Index

The Body Mass Index is an indicator of your level of health relative to your height and weight.

$$BMI = \frac{\text{Weight (Kilograms)}}{\text{Height (meters) x height (meters)}}$$

$$BMI = \frac{\text{Weight (pounds)}}{\text{Height (inches) x height (inches)}} \times 703$$

Compare your BMI to the chart below to determine your level of risk

Classification	BMI (Kg/m^2)	Risk Level
Underweight	<18.5	Low but risk of other health problems increase
Normal range	18.5 - 24.9	Average
	18.5 - 23.0	* Average in some Asian populations
Overweight	25.0 - 29.0	Mildly increased
Obese	>30.0	High
Class I	30.0 - 34.9	High moderate
Class II	35.0 - 39.0	High Severe
Class III	40.0	High very severe

How to have a healthy weight, healthy shape : Energy balance :

Being overweight is due to more calories being consumed than used. We need to live in "energy balance" if you need to lose weight, your calories intake must be less than the calories you burn. Regular exercise and eating a balanced diet will help you to stay fit and burn more calories. Avoid fad diets that offer unrealistic results and encourage eating (or not eating) specific foods. Remember if you lose weight gradually you are more likely to keep it off.

Healthy eating

- Adopt a balanced diet including plenty of fruits and vegetables, whole grain products, low fat-free products (however take calories into account) unsaturated soft margarines and oils (such as sunflower, corn, rape-seed, olive) lean meat, fish & pulses.
- Restrict salt and sugar intake
- Eat breakfast and make sure to have atleast 3 meals per day.
- Use healthier cooking methods such as steaming, boiling grilling and baking instead of deep fat-frying and adding extra fat and develop healthy cooking skills within your family.
- Avoid buying sweets and junk food
- Drink atleast 6-8 glasses of water per day
- Expect temptation, so plan healthy meals in advance.

Regular exercise

- For adults, even 30 minutes of brisk walking daily will help reduce your risk
- Children should have 60 minutes of physical activity per day.
- Surround yourself and your family with supportive people who either participate with you or remind you to exercise.
- Support measures that encourage safe walking and cycling where you live

- Decrease in family television viewing and increase your involvement in regular family support and activities
- Encourage your family and friends to have a heart for life too.
- At home: work together in the garden, walk or bike to run errands and get off the bus one stop early.
- At work : take the stairs instead of the lift, participate or create a physical activity group, walk around your building or exercise during your lunch break.
- At school: Encourage your child's school to serve healthy meals and increase physical education in the curriculum.

Exercise does not mean that you have to wear fashionable sports clothes or that you have to join an expensive gym. Strenuous exercise classes are not needed. Walking is one of the best ways to exercise and to keep fit. All the physical activity that your heart needs can come from a simple stroll.

Other types of exercise as bicycling (stationary or regular), calisthenics, swimming/running and skipping are also good. You can choose what suits you best.

Physical Fitness:

Physical fitness refers to how well you look and how well you perform physically. How well you look depends upon your body posture, body build and body fat.

Fitness is having suppleness, strength and stamina.

Suppleness :

Being able to bend, stretch, twist and turn through a full range of movement. You need it all the time for awkward jobs around the house, for getting in and out of an automobile and trains. If you are supple you are less likely to be injured, and you will be able to remain more active as you get older.

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AND

Strength

Being able to exert force for pushing, pulling, and lifting. You need strength all the time for climbing stairs, to carry bags, to shift furniture etc. It protects you from sprains and strains. A strong back and a good tummy will help you to have good posture.

Stamina

Being able to keep going when running or walking briskly without getting tired or out of breath very quickly. Stamina is useful when you are in a hurry to get somewhere or when you need to keep up with your children. Stamina is helpful to protect you from heart disease.

Exercise for stamina are often called "aerobic" because you breathe in enough oxygen to supply your working muscles.

Excess weight is a risk

Extra weight means that the heart has to work harder to supply blood to the body, it significantly increases your risk of heart disease and stroke. In children, excess weight means they are three to five times more likely to suffer a heart attack or stroke before they reach 65.

Excess weight also increases your likely-hood of developing other problems which contribute to the risk of heart disease and stroke.

- High blood pressure : An overweight person has a 2-6 times greater risk of developing high blood pressure.
- High blood cholesterol : Your level of cholesterol is affected by the amount of saturated fats eaten everyday. If you are overweight you are at greater risk.
- Diabetes Type 2 - : 80% of people with diabetes are overweight.

President Bill Clinton and Roger Federer Support World Heart Day

President Clinton and his Foundation recently joined the American Heart Association in the Healthiest Generation Alliance to combat childhood obesity. "If we want today's children to become tomorrow's parents and leaders, we must act now to reduce the growing prevalence of heart disease and stroke by teaching them healthy habits now" said former President Bill Clinton. "We thank the World Heart Federation for focusing on the importance of maintaining a healthy weight, healthy shape and reducing childhood obesity for this year's World Heart Day and for their commitment to promoting heart healthy lifestyles, balanced diets and more physical activity."

World number one tennis star Roger Federer, as spokesperson for the United Nations International Year of Sport and Physical Education (IYSPE 2005) is supporting the World Heart Day campaign and the benefits of healthy living. "As a professional athlete, I understand first-hand the benefits of living a healthy lifestyle. Playing and training for tennis is a great way to maintain a healthy weight and body shape. Wherever you live in the world, moderate but regular exercise is extremely important. A small amount of effort can make a big difference and help you have a healthy heart for life too," recommends Roger Federer.

WORLD HEART FEDERATION®

Cohn & Wolfe

THE WORLD HEART FEDERATION AND COHN & WOLFE PUBLIC RELATIONS WIN PRESTIGIOUS CHARITY AND VOLUNTARY SECTOR AWARD FOR CAMPAIGN ON HEART DISEASE PREVENTION

The World Heart Federation, an NGO based in Geneva committed to helping the global population achieve a longer and better life through prevention and control of heart disease and stroke, and its PR Agency Cohn & Wolfe, have been awarded a ***Third Sector Excellence Award*** for their outstanding international campaign, "A Heart for Life" focused around the World Heart Day campaign.

The Third Sector Excellence Awards are dedicated to celebrating the success and achievements of charities and voluntary organisations. The awards recognise excellence from business strategies, to marketing and individual and group performance, and cover activities from fund-raising to campaigns, to finance and human resources.

World Heart Day 2004 was awarded Best International Campaign, for the marketing and PR campaign that most effectively reached target audiences in multiple countries, achieving awareness raising success. The Award was presented at a ceremony in London on 6th October 2005.

"Children are increasingly adopting unhealthy lifestyles and the leading causes of heart disease and stroke - obesity, poor diets, smoking and physical inactivity - are being seen at an alarmingly early age," said Sania Nishtar, Chairperson of the Foundation's Advisory Board for the World

Heart Federation. "We use the approach of social marketing to create awareness of this critical issue at a worldwide level. Cohn & Wolfe's creative programmes have made World Heart Day arguably the most consistent and focused campaign against heart disease and stroke undertaken across the globe. Together, we've made tremendous steps forward in terms of our influence and ability to communicate vital prevention messages in a cost effective way," said Sania Nishtar.

Over 100 countries took part in World Heart Day, with the World Heart Federation's member societies organising a wide range of educational activities and adapting the promotional materials created by Cohn & Wolfe. For example, in Brazil a walk was organized where participants carried red heart-shaped balloons to a city park where they were given fruit, tips on living a healthy lifestyle and a free yoga and dance class; in Egypt, text messages (SMS) containing health tips were sent to cell phone users by a mobile network company; in Norway, there was a children's jump rope competition; and in Cameroon more than 800 people received free screenings for obesity, diabetes and hypertension.

In 2004, over 350 articles and broadcast features were generated, reaching over 395 million parents, children and adolescents with educational messages about the risks of unhealthy lifestyles and the link to heart disease and stroke.

The award was presented at a ceremony in London on 6th October.

The message "Children, Adolescents & Heart Disease" of year 2004 helped to raise awareness of the fact that heart disease and stroke are now being seen at an alarmingly early age caused by obesity, poor diets and lack of physical exercise. With 390 articles and broadcast features and 395

million circulation/listenership through print media such as Time magazine in Asia, Financial Times, British Medical Journal, Wall Street Journal and also through many radio programs such as BBC World Service, Voice of America, Radio France International (RFI) and BBC News, the campaign was a tremendous awareness building success.

Personalities such as Health Ministers and First Ladies from different parts of the world were involved in the campaign. For example, the First Lady of Kenya asked Kenyans to stop taking their children to fast food places and, instead, buy fresh food from the market and cook it for them.

Thanks to the support of the campaign by the United Nations organizations such as UNICEF, UNESCO, WHO and the Union of European Football Associations (UEFA), the message reached a broad global audience.

Most importantly the World Heart Federation and its members in 100 countries were able to influence people around the world.

The AIHF congratulates the WHF in this achievement. World Heart Day 2004 was celebrated in New Delhi with great enthusiasm and a souvenir published.

For more information visit: www.worldheart.org or www.cohnwolfe.com

START EARLY TO STAY HEALTHY

H.P.S. Sachdev
Professor and Incharge, division of
Clinical Epidemiology,
Department of Pediatrics,
Maulana Azad Medical College,
New Delhi 110 002.

There is a significant rise in many adult diseases like insulin resistance, type 2 diabetes, hypertension, coronary artery disease, hyperlipidemia, stroke and certain cancers. It is estimated that by 2025, India will have more people with diabetes (57 million) than any other country (1) and that prevalence of coronary heart disease has increased by a factor of six to eight, over the past four decades (2.) Central to these rapidly escalating diseases is the rise in prevalence of obesity consequent to rapid nutrition transition and urbanization. For a comparable BMI, Indian have more body fat and lower muscle volumes than other ethnic groups (thin fat Indian phenotype). This means that many Indians have high body fat, at BMI values that are in nonobese range (3). Indians as an ethnic group are also more prone to abdominal obesity which is a major concern. Increase in visceral fat, leads to a state of insulin resistance (impairment of insulin action), which in turn leads to a deadly Metabolic Syndrome (also known as Syndrome X, a combination of glucose intolerance, hyperinsulinemia, central obesity, hypertension and dyslipidemia) (4). An epidemic of adult metabolic diseases is looming large with adverse health consequences that can bankrupt the nation.

Individuals caring for children cannot afford to ignore this situation, particularly with the rapidly accumulating evidence that adult metabolic diseases have their origin in adolescence (or earlier in childhood and even

in fetal life), and manifest due to interactions and accumulation of various risk factors, throughout the life course. Longitudinal data indicate that sustained and accelerated childhood weight and BMI gain (crossing into higher categories) is associated with adult morbidity including diabetes, hypertension and coronary artery disease. Interestingly young adults with impaired glucose tolerance or diabetes were not overweight or obese as children by international standards but they were getting bulkier relative to themselves (5). Thus it is important that an individual child is monitored with regular weight and or serial BMI measurements to detect a grow trajectory at risk of developing adult disease. It is a bit ironic that a problem of "plenty" namely childhood obesity has arisen while we are still fighting under nutrition and infectious disease. Adverse health consequences of positive nutrition transition in children are undermined as they are seemingly "remote" and therefore "relatively invisible". This has resulted in a false sense of complacency leading to inaction in this age group (6). However, if the epidemic of adult metabolic diseases is to be controlled, intervention must commence early in life.

In this context, to create awareness and to provide clear guidelines for actions to be taken in childhood, the Indian Academy of Pediatrics established a National Task Force on Childhood Prevention of Adult Diseases. The Task Force had recently published its recommendations in a series of articles (7-9). It is important that the personnel caring for children integrated these recommendations in their routine practice. The salient features of these recommendations are summarized below.

1. Identifying Cases 'at risk'

a) Orienting Routine Clinical Practices

i) History : Personal History of fattening diet, physical inactivity, sedentary behaviour (like >2 hrs TV viewing); Family history of early hypertension, coronary artery disease and diabetes.

ii) Physical examination :

Anthropometry:

Linear growth : This should be done by yearly growth (height, weight and weight for height / BMI) charting 3 to 6 monthly from birth to 5 years of age and 6 to 12 monthly thereafter. Any accelerated weight gain should be considered a risk factor. If feasible multiple skin fold thickness (biceps, triceps, subscapular, suprailiac), waist circumference should be measured.

All Indian children > 10 years in age and who are overweight (BMI > 85th centile for age or weight > 120% of the 50th centile weight for height by national standards), and have any one of the following risk factors: family history of type 2 DM in first or second degree relative, polycystic ovaries, acanthosis nigricans, dyslipidemia or hypertension. Pending the availability of good Indian nationally representative standards for BMI in childhood, the two BMI charts that can be followed are: i) The NCHS/CDC charts from USA; ii) the definition for overweight and obesity worldwide, provided by the International Obesity Task Force of the W H O.

Recording blood pressure in all from age 3 years, and looking for acanthosis nigricans (hyperpigmented skin lesions in neck and intertriginious areas) and polycystic ovaries after 10 years of age.

iii) Investigations:

Two yearly screening of blood glucose in those at risk, after age 10 years. Diabetes is diagnosed if fasting plasma glucose is $\geq$ 126mg/dl and or 2 hr post glucose plasma glucose value $\geq$ 200 mg/dl; Lipid profile in children age > 2 years with family history of dyslipidemia or premature cardio-vascular disease; or anytime in children with family history unknown but with any risk factor for insulin resistance.

2. Interventions

a) Dietary modifications

Emphasis should be on nutrition rather than 'dieting'. It is important to maintain healthy components of traditional diets (i.e., micro nutrient rich food such as fruits, vegetables and whole grain cereals) and guard against heavily marketed energy dense fatty and salty foods (e.g., pre-packaged snacks, ice-creams and chocolates) and sugary cold drinks. The strategy should be to recognise and eliminate risk features of high calorie intake such as frequent snacking (samosas, potato chips, chidwas), eating out frequently (burgers, dosas), celebrating with food (cake, chocolates) and drinks (colas, beers). Healthier alternatives can be suggested. Habits attained early have more chance of remaining throughout life.

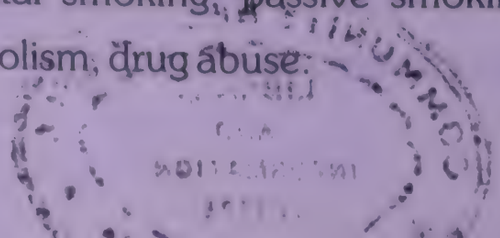
It is prudent to prevent feeding excess calories to children with low weight for age but normal weight for height i.e., 'stunted children'.

b) Increase physical activity level

The WHO recommends atleast 30 minutes of cumulative moderate exercise (equivalent to walking briskly) for all ages; plus for children, an additional 20 minutes of vigorous exercise (equivalent to running), three times a week. In general, moderate to vigorous activities for a period of atleast one hour a day may be a more practical recommendation for all school going children. Perhaps even more important is decreasing sedentary behavior like viewing television (should be restricted to no more than 2 hours a day), computers, telephone conversations.

c) Modulating risk factors

Parental smoking, passive smoking, non smoking tobacco use, alcoholism, drug abuse.



d) *Creating various channels of interventional/health education*

School based programs to enhance physical activity are already in place in many developed countries. "Child Friendly School Initiative" proposed by Indian Academy of Pediatrics is a step in this direction. Campaign against substance abuse like smoking, non smoking tobacco use, alcoholism need intensification. Advocacy at all levels notably teachers, government functionaries, professionals, media, academic bodies, food regulatory authorities and so on are urgently needed to stall the ensuing epidemic of metabolic syndrome.

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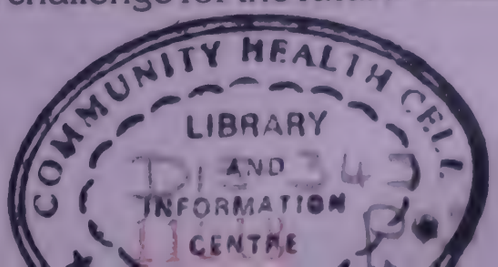

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BODY SIZE, SHAPE AND HEALTH

Dr Prema Ramachandran
Director, Nutrition Foundation of India, New Delhi

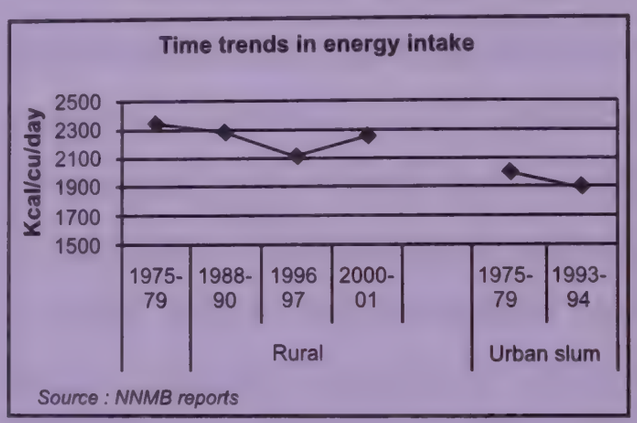
Introduction

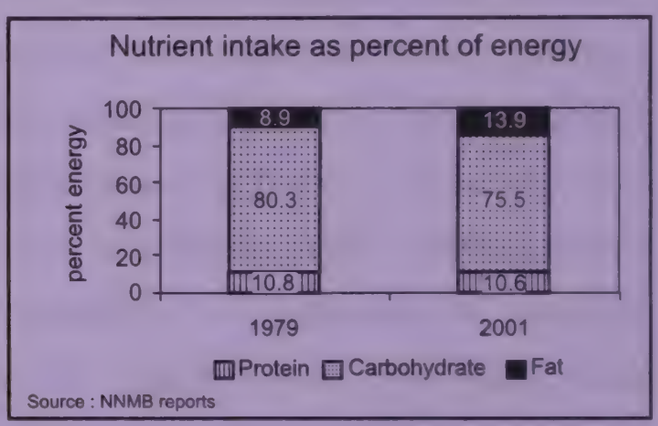
Currently India is in the midst of a rapid socioeconomic, demographic, nutrition and health transition. While the country is yet to overcome poverty, under-nutrition and communicable diseases, it is increasingly facing problems of over-nutrition and obesity. This is a matter of concern because while morbidity due to infections seen often in association with under nutrition have not shown any decline there has been a progressive increase in prevalence of diabetes and cardiovascular disease seen in association with over-nutrition. It is a matter of concern that even poorer segments of population and those in rural areas are now suffering from the dual nutrition and health burden and non communicable diseases occur a decade earlier in Indians. The case fatality rates are reported to be higher in poor and rural populations probably due to delays in diagnosis and treatment. Life style changes that have occurred over the last three decades are thought to be the major factors responsible for the progressive increase in both over-nutrition and non-communicable diseases. There is also some evidence to suggest that Indians may be genetically more prone to accumulate fat and suffer from metabolic syndrome associated with abdominal obesity. The possibility that under-nutrition in early life may predispose to over-nutrition in later years have been explored by several research studies in the last few years. Some of the reported data on the effect of body size and shape on health will be reviewed in this manuscript.

Life style changes and changes in body size

During the past three decades there has been

- reduction in energy intake in both urban and rural areas.
- some increase in dietary energy derived from fat and a reciprocal reduction in percentage of dietary energy derived from carbohydrate.
- some increase in consumption of fats and oils, in urban population and even in urban slum population.





Unlike dietary intake data there are very few studies documenting change in the physical activity pattern over the last three decades. However it is well documented that over this period there has been

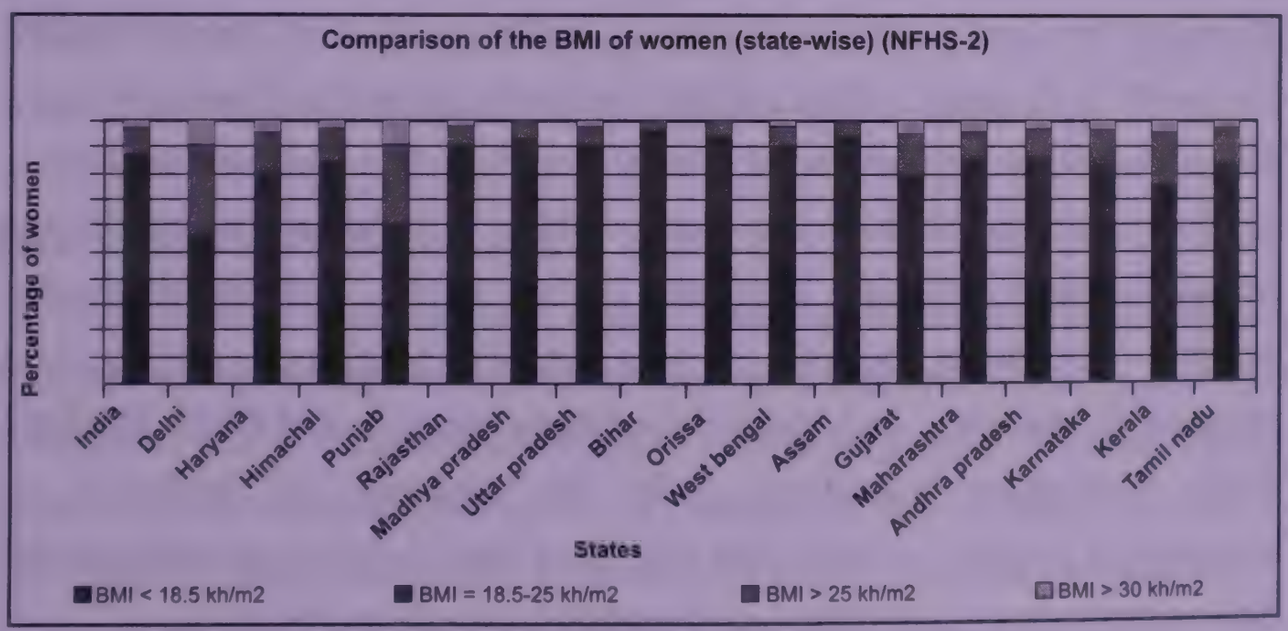
- reduction in the number of the persons engaged in manual work
- substantial improvement in mechanical aids in agriculture, industry and allied activities
- improvement in access to water and fuel near households both in urban and rural areas
- availability of urban mass transport at affordable cost has resulted in less number of people walking or cycling to work place, school or market
- mechanical aids have reduced physical activity during cooking and household chores

- among urban affluent class TV and computers contributed to steep reduction in physical activity .

As a result of these life style changes, there has been a reduction in energy requirements. Unchanged energy intake and reduced energy requirement is associated with positive energy balance, fat deposition and weight gain.

Prevalence of over nutrition

Available data from National Nutrition Monitoring Bureau has shown that over years there has been an increase in the over-nutrition both in urban and rural areas. Increase in over nutrition in rural areas is relatively lower as compared to urban areas. Data from the National Family Health Survey indicate that there are considerable inter state differences in the prevalence of over-nutrition.



Factors responsible for emerging problem of over-nutrition

During the last three decades there has been a progressive decline in poverty ratio and a steep increase in per capita income. Economic improvement inevitably results in improved purchasing power, ability to purchase food items and consume many of them. This in turn can lead to

some increase in energy intake from fats, sugar, refined carbohydrates, reduction in energy intake from complex carbohydrates and reduction in dietary fiber. Simultaneously there is a reduction in physical activity and perhaps increase in work related stress because of change in occupation. The combination of factors might be responsible to some extent for the rapid increase in over nutrition, and hypertension in segments of population who have just emerged from poverty. This situation would also apply to rural migrants who settle down in urban areas.

It is well documented that Indians have higher body fat for the same BMI as compared to the Caucasians. Prevalence of abdominal obesity is higher in Indians. Both over-nutrition and abdominal obesity are associated with increased risk of hypertension, diabetes and CVD.

It is however important to remember that the seeds for obesity in adult life might be shown decades earlier. In India one third of the babies are born with birth weight below 2.5.kg. The thrifty gene hypothesis proposes that populations who had faced energy scarcity over millennia may evolve so that majority have thrifty gene, which conserves energy. If this population gets adequate or excess energy intake, they lay down fat, develop abdominal obesity, increase insulin resistance, which may progress to diabetes, and incur risk of hypertension and CVD. Barker's thrifty phenotype hypothesis shifts the evolution of thriftiness to intrauterine period; Indians with one-third low birth weight rate can be deemed to have acquired the risk of metabolic syndrome in utero.

Yagnik and coworkers in Pune explored the relationship between low birth weight and glucose. Investigated was insulin metabolism (OGTT) in 477 children born in KEM hospital, Pune. They found that Indian neonates were small because they had poor muscles and small abdominal viscera. These neonates however had conserved their subcutaneous fat. At 4 years of age plasma glucose and insulin concentrations 30 minutes after

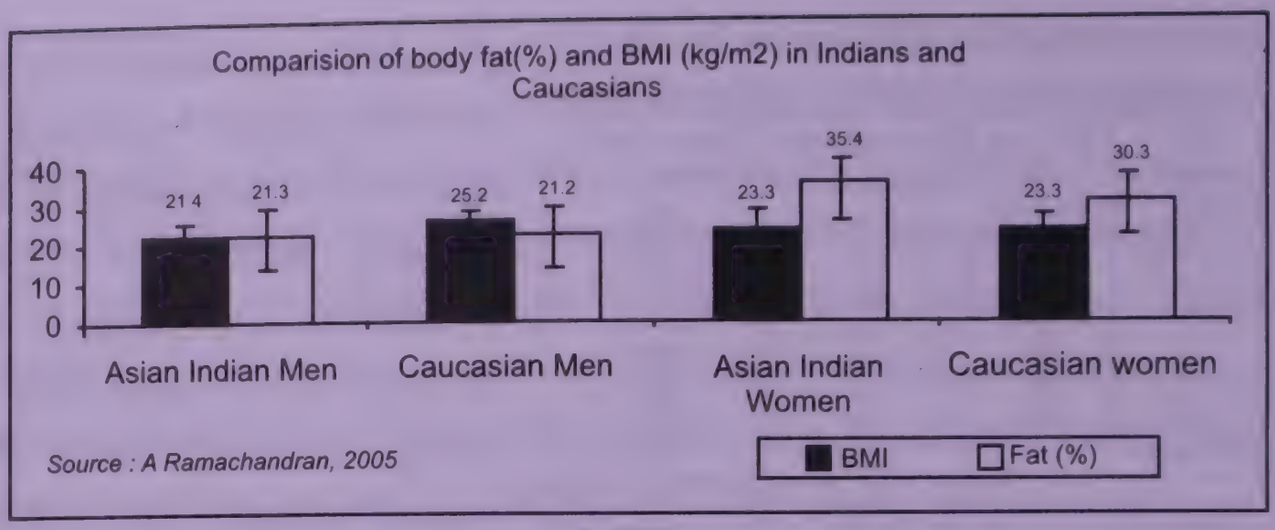
Birth weight, plasma glucose and insulin concentrations in 4-year old urban children			
Birth weight (kg)	Number of children	Plasma glucose (mmol/l) at 30 min	Plasma insulin (pmol/l) at 30 min
=< 2.4	36	8.1	321
-2.6	36	8.3	337
-2.8	44	7.8	309
-3.0	42	7.9	298
=>3.0	43	7.5	289
All	201	7.9	310
P for trend		0.01	0.04
Source: Yagnik et al, 1998			

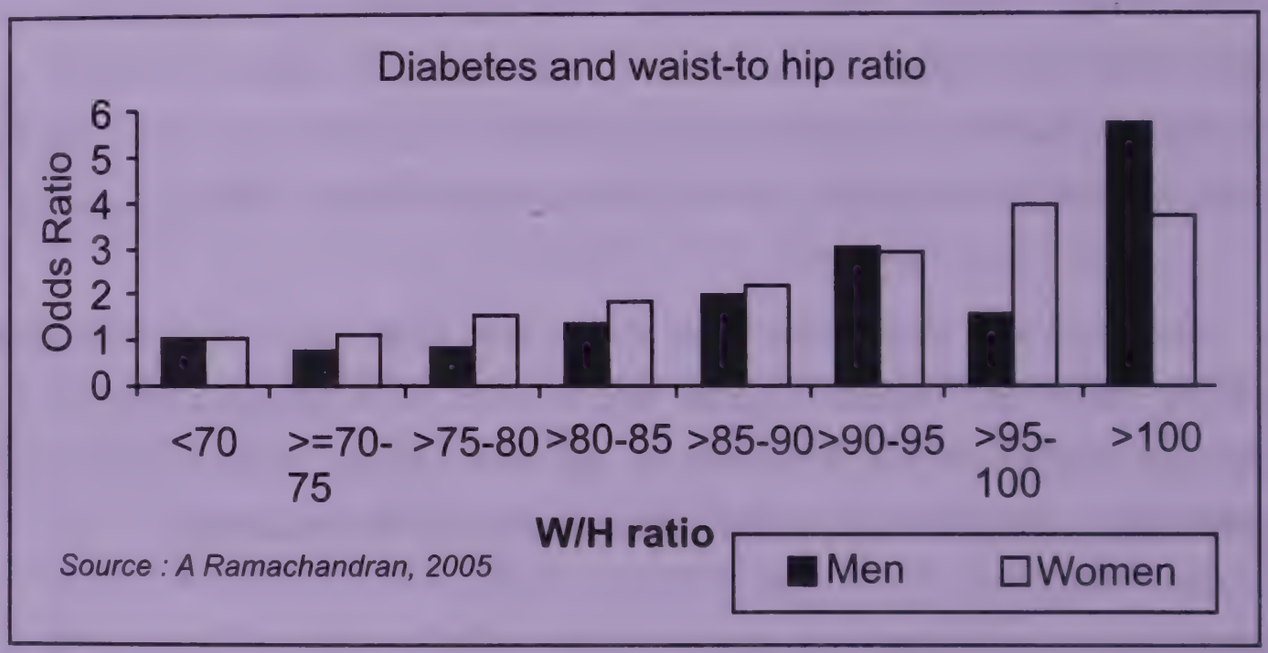
glucose were inversely related to birth weight but directly related to current weight and skinfold thicknesses. The relationship between glucose/insulin and birth weight was independent of current weight. Thus poor intra-uterine growth, but relatively excess growth later ('obesity') was associated with metabolic endocrine abnormalities, which could lead to diabetes in adult life. Adolescent obesity is a well-documented entity in both urban and rural areas and may be the stepping-stone for adult obesity.

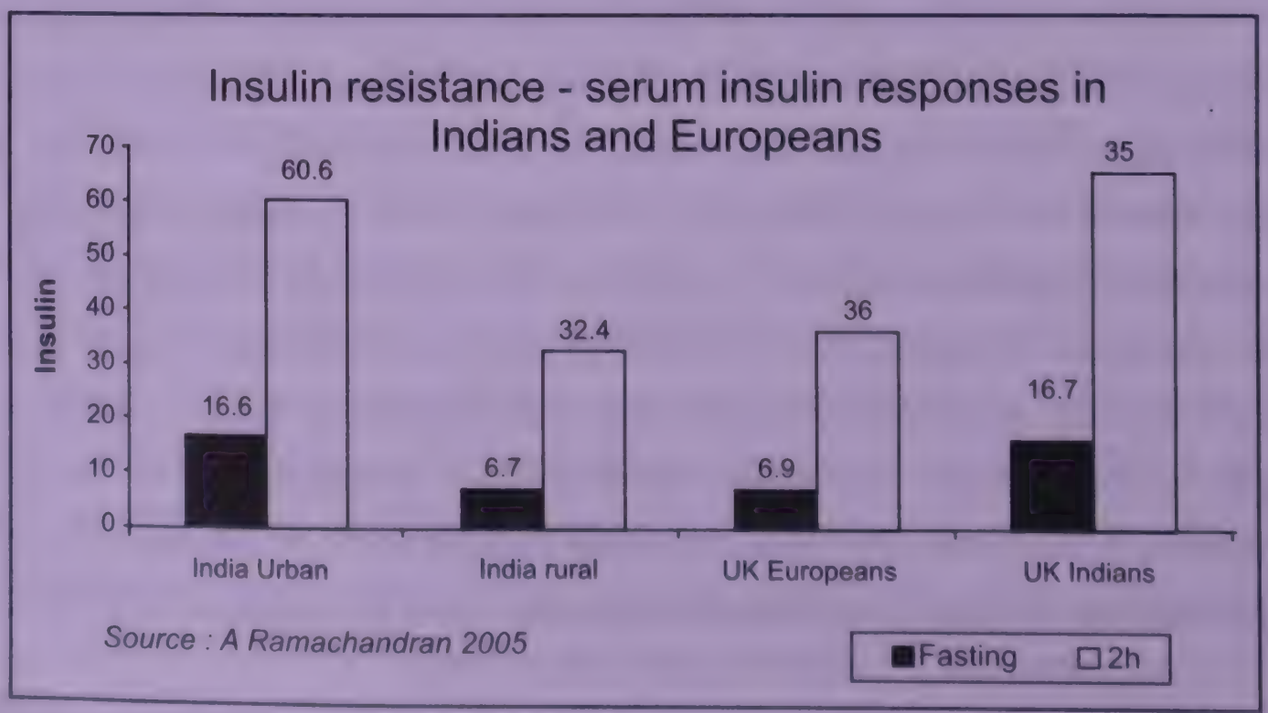
Bhargava and co-workers have shown that urban Delhi in the nineties makes even low middle-income adults who were undernourished in infancy, childhood and adolescence, develop obesity- both general and abdominal - hypertension and diabetes by the time they are thirty.

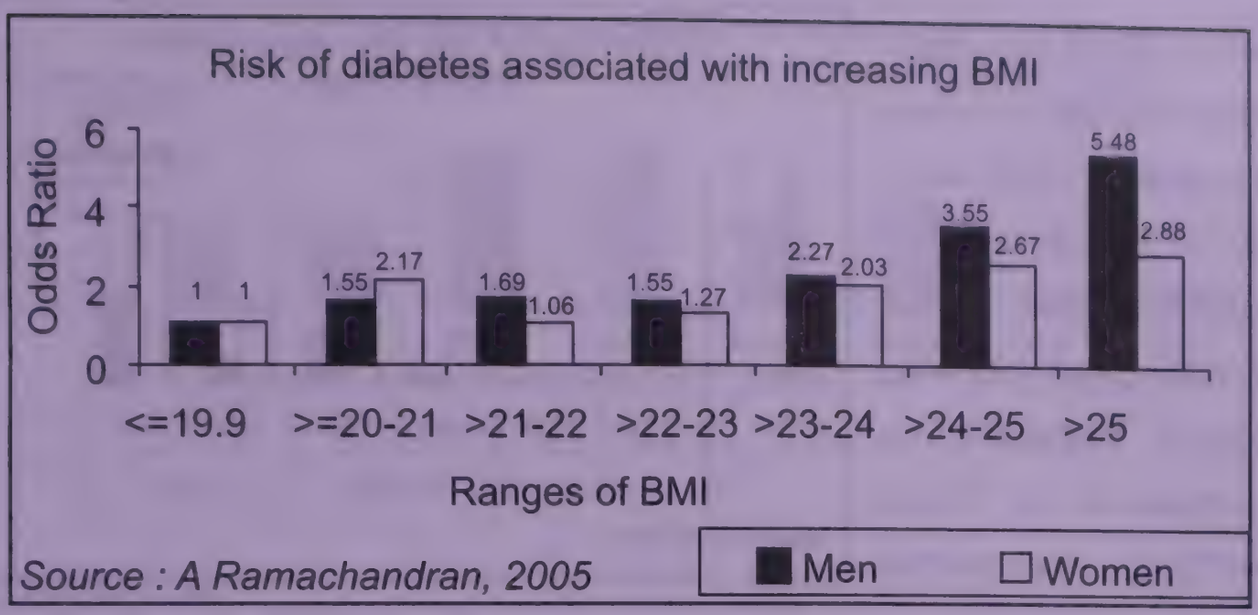
Over nutrition NCD linkages

Studies from Chennai have shown that with increasing BMI there is increase in risk of diabetes both in men and women. There is a steep increase in risk of diabetes when BMI increase beyond 23 . There was a progressive increase in prevalence of diabetes with increasing waist-hip-ratio both in men and women . Indians have higher body fat for given BMI as compared to Caucasians. Association between abdominal obesity and the metabolic syndrome of hypertension, dyslipedemia, insulin resistance and diabetes have been well documented. Comparison of insulin resistance and insulin response between Indians and UK citizens showed that both fasting and 2 hour insulin levels are lower in Indians in rural areas


Comparision of body fat(%) and BMI (kg/m2) in Indians and Caucasians
40
30
20
10
0
21 4
21.3
25.2
21.2
23.3
35.4
23.3
30.3
Asian Indian Men
Caucasian Men
Asian Indian Women
Caucasian women
Source : A Ramachandran, 2005
BMI
Fat (%)


Diabetes and waist-to hip ratio
Odds Ratio
6
5
4
3
2
1
0
<70
>=70-75
>75-80
>80-85
>85-90
>90-95
>95-100
>100
W/H ratio
Source : A Ramachandran, 2005
Men
Women

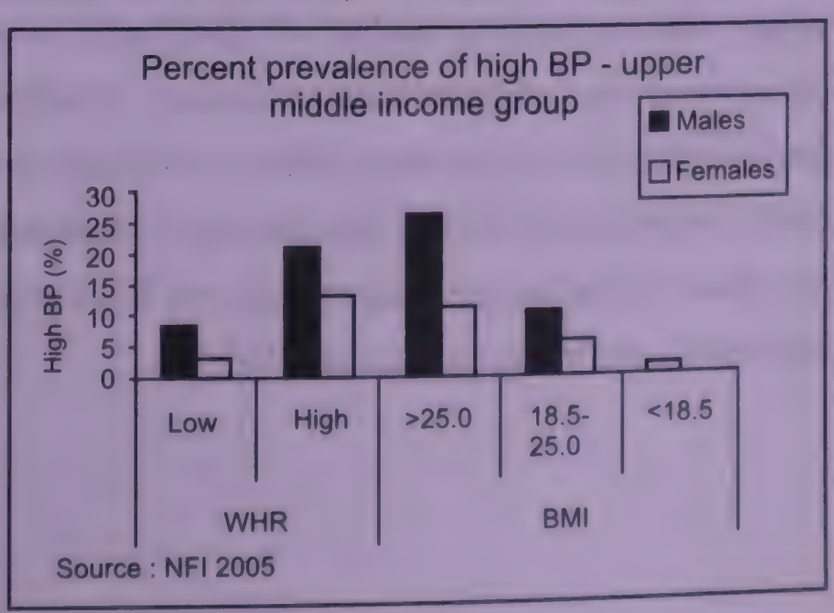

Insulin resistance - serum insulin responses in Indians and Europeans
Insulin
70
60
50
40
30
20
10
0
16.6
60.6
6.7
32.4
6.9
36
16.7
35
India Urban
India rural
UK Europeans
UK Indians
Source : A Ramachandran 2005
Fasting
2h



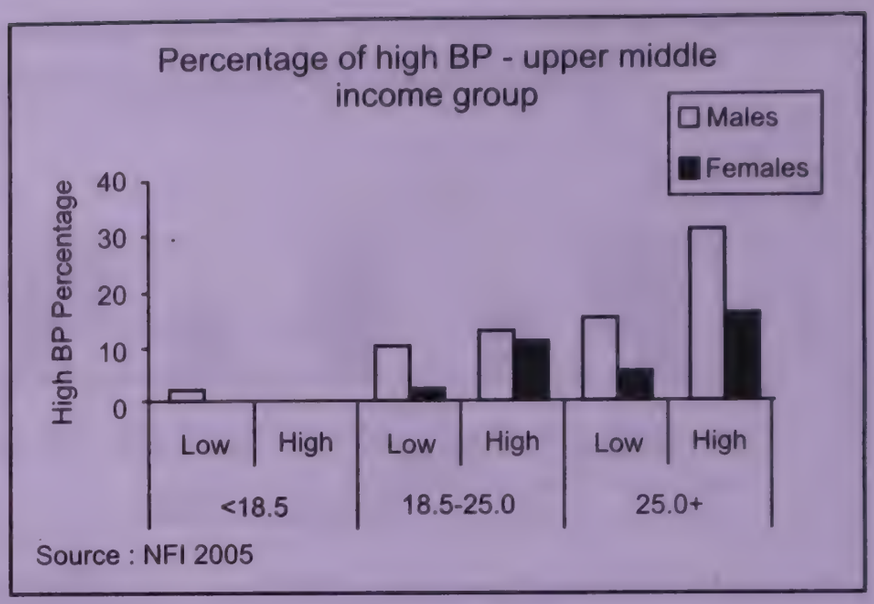
and Europeans in UK; urban Indians and Indians residing UK have substantially higher fasting and 2 hour insulin levels indicating insulin resistance (Figure 9.4). Data from urban affluent population show that prevalence of insulin resistance is high not only in adults but also in children and young adults REF.

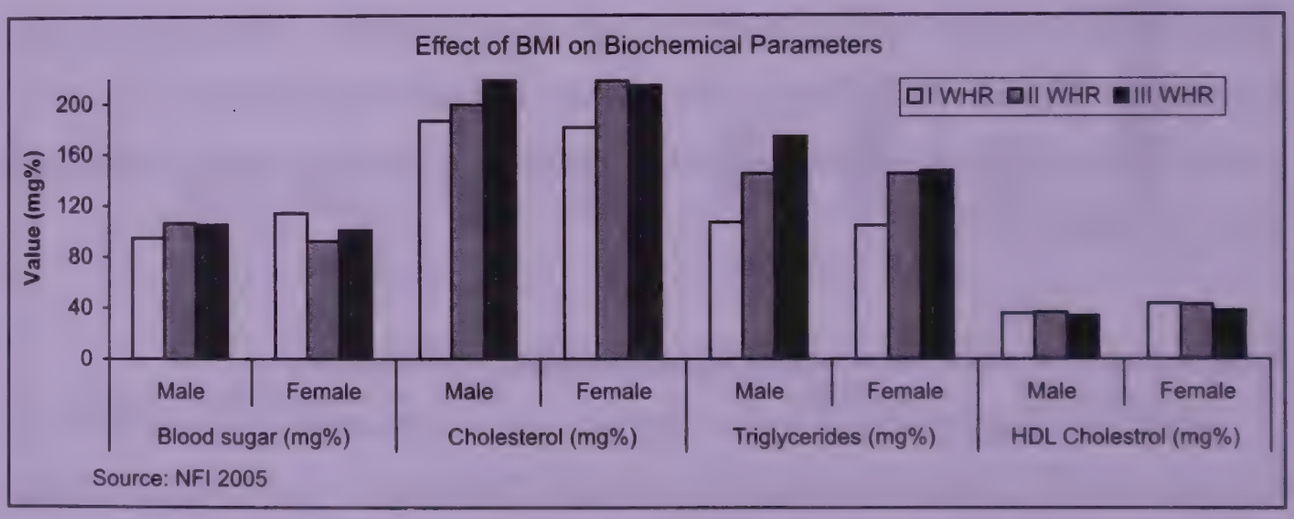
Linkages between over-nutrition and hypertension

Nutrition Foundation of India carried out studies exploring relationship between over nutrition and cardiovascular diseases in - persons belonging to different income groups working in a Government Institution. There were a larger proportion of subjects having higher WHR (50.3%) compared with the population with BMI>25 (30.8%). The higher the BMI and WHR, the higher were the prevalence rates of hypertension both in men and women. The prevalence of high blood pressure in the normal and overweight subjects was higher

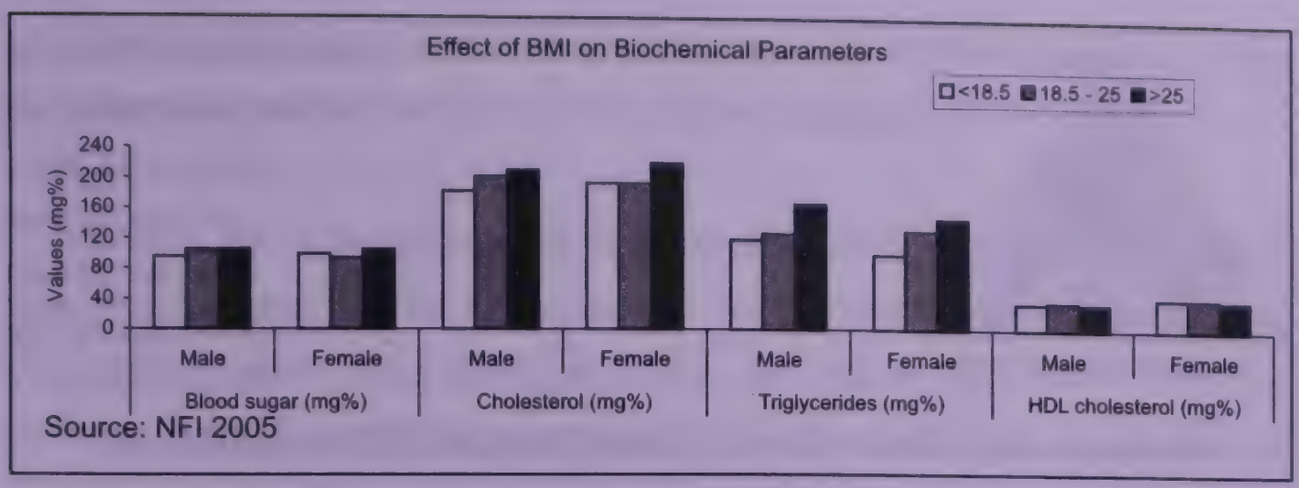


when WHR was high. Overweight/obese subjects of both sexes with abdominal adiposity had higher systolic and diastolic blood pressure as compared to those without abdominal obesity.





Serum cholesterol and triglycerides in men were significantly higher in subjects with BMI>25. There was a positive trend of increase in blood sugar with increasing values of BMI both in men and women. Serum cholesterol and triglycerides increased significantly with increasing BMI and WHR both in men and women. A similar trend was seen in the ratio of total cholesterol and HDL cholesterol. Cholesterol levels greater than 180 mg % and blood sugar levels of 140 mg % were mostly seen in subjects with high BMI, and those with greater WHR.



Source: NFI 2005

Conclusion

The lesson to be learnt from these data is that it is never too early for Indians to start practicing healthy lifestyle and dietary habits. Early detection and correction of under-nutrition until children attain appropriate weight for their height is essential to promote linear growth. Adolescents and adults should ensure balanced diet with just adequate energy intake. Exercise has to become a part of daily routine to promote muscle and bone health as well as prevent development of adiposity in all age groups.

Almond Board of California
1150 9th Street, Suite 1500
Modesto, CA 95354
Tel: 209.549.8262
Fax: 209.549.8267
www.AlmondsAreIn.com

In Lowering Cholesterol, New Research Shows Dietary Approach Including Almonds Works as well as Statins

A new study published in the Journal of the American Association (JAMA) finds that eating a certain dietary plan high in heart-healthy foods including almonds is as effective in managing cholesterol as taking a starting dose of cholesterol-lowering drugs. Known as the "Portfolio" eating plan, this dietary approach also lowered c-reactive protein levels, an indication of inflamed arteries and a risk factor for heart disease, in individuals who followed the plan more than in the patients taking statins.

Almonds were the only nut included in the eating plan, which also includes foods high in soy protein, viscous fiber and plant sterols, said study leader Dr. David Jenkins of the Clinical Nutrition and Risk Factor Modification Center at St. Michael's Hospital in Toronto and the University of Toronto's Department of Nutritional Sciences, Faculty of Medicine. (Ref JAMA July 23/30 2003 Vol.2 90, No.4))

The third in a series of Portfolio studies, this is the first study to directly compare patients on first-line statins to those on the diet. Patients on the Portfolio eating plan lowered their DPL, or "bad", cholesterol up to 32 percent and on average 29 percent in four weeks.

All Portfolio studies to date have consistently shown a drug like-effect in improving patients' cholesterol profiles. (A previous Portfolio study

appeared in the journal Metabolism last year; another was presented at an American Heart Association meeting earlier this year.)

Patients ate a daily handful of almonds, which Dr. Cyril Kendall, a research scientist on the team, calls a "mini-Portfolio" because of their vegetable protein, plant sterols and fiber, as well as their overall nutrient density. Almonds with their high vitamin E content, may have been a factor in decreasing the Portfolio subjects' c-reactive protein levels.

In addition, patients ate foods with viscous fiber, such as oat bran, barley, okra and eggplant, as well as Metamucil [R]; plant sterol-enriched margarines such as Benecol [R] or Take Control [R], beans (especially chickpeas) and olive oil; and soy protein in forms such as tempeh, tofu and Boca [R] meatless "chicken" and "hamburger" patties. The eating plan was designed as a heart-healthy, low-saturated fat diet.

Among these choices, the five most popular foods among study participants on the Portfolio plan were almonds, ground soy, (which tastes similar to ground beef), oat bran cereal, oat bran bread and plant sterol margarine.

"For the most part, research on dietary changes has resulted in only modest reductions in cholesterol, and diet has been considered by some as relatively ineffective," Jenkins said. "But on their own, these heart healthy types of foods have been studied individually and recognized by the Food & Drug Administration FDA) for their cholesterol-lowering effects'" he said. In fact, just recently, almonds received a heart-related qualified health claim from the FDA.

"This research showed that when we combined these heart healthy foods into one eating plan, the effect was equal to that of the starting dose of statins, or cholesterol lowering drug therapy and yielded better results than previous dietary recommendations for cholesterol reduction. These results support the recommendations of the Adult Treatment Panel III guidelines panel that dietary intervention should be the first line of therapy for high cholesterol."

According to the Centers for Disease Control and Prevention, more than half of all American adults have cholesterol levels higher than they should be.

News Everyone Can Use

For someone not needing a dramatic reduction in their LDL cholesterol level, but merely a moderate drop or to maintain a healthy heart, this study may indicate the benefit of incorporating just some of these foods each day, or making some new heart-healthy substitutions, Jenkins said. "The earliest substitutions to try might include a snack of almonds instead of popcorn, pretzels or potato chips, or a soy burger instead of as regular burger," he added.

Study Methodology

For one month, the study directly compared three randomized groups of patients with high cholesterol. One group of 16 people ate the National Cholesterol Education Program's step 2 diet, which is a very low-saturated fat-diet based on whole wheat cereals and low fat dairy foods. Another group of 14 people ate this diet in addition to taking a 20-milligram lovastatin, a cholesterol lowering drug, each day. And a third group of 16 people ate a Portfolio eating plan high in almonds and other foods high in plant sterols and vegetable protein as well as viscous fiber.

For the statin and Portfolio groups, the drop in LDL, or "bad," cholesterol was comparable, with 31 percent (+/- 3.6 percent) drop for the statin group and a 29 percent (+/- 2.1 percent) drop.

For More Information

The Almond Board of California administers a grower-enacted Federal Marketing Order under the supervision of the United States Department of Agriculture. Established in 1950, the Board's charge is to promote the best quality almonds, California's largest tree nut crop. For more information on the Almond Board of California or almonds, visit www.AlmondsAreIn.com.

Sixth World Heart Day begins with symbolic walk

Statesman News Service

NEW DELHI, Sept. 25. — With a population of one billion, India has only about 35 health centres that are fully equipped for the diagnosis and treatment of heart diseases. In such a situation prevention is the the only logical solution said the eminent cardiologist, National Heart Institute and Padmabibhushan, Dr S Padmavati at a function organised at the Rajghat to commemorate the Sixth World Heart Day.

Organized by the All India Heart Foundation and Cardiological Society of India this event, which was flagged off by the Delhi finance minister, Dr A K Walia, was marked by a symbolic walk from Shantivan to Shaktisthal by 1000 morning walkers.

A question and answer session on heart related queries from the public was answered by Dr S Padmavati and Dr Vinod Sharma from National Heart Institute. A quiz for ladies and children on eating habits and a free blood sugar and blood pressure check-up were the other activities organized on this occasion.

Morning walkers participated in a run from Shanti Van to Shakti Sthala on the World Heart Day in the Capital on Sunday. — The Statesman

"In a survey conducted by NHI it was found that nearly 27 per cent children in Delhi are obese.

The children in the age category of 13 – 15 years complained of high BP and many have shown signs of diabetes at an early age," said a cardiologist of NHI, Dr Vinod Sharma.

"Children of private schools are more obese which is rare in children of government school," added Dr Sharma as another observation from this survey.

The cardiologist, NHI, Dr Dave also suggested that "the longer the waist line shorter the life line."

He also said, "Many woman complain that pregnancy had stretched their waist line. It is wrong. Rather the high calorie diet that one has after pregnancy is responsible for it."

Dr Dave suggested fruits as the best food for a healthy body. The theme of this occasion was "healthy weight healthy shape."

DELHI - SPECIAL - Sun 25, 2005

Walk to keep heart healthy

By NAMRATA AHUJA

New Delhi, Sept. 24: Pamper your heart this Sunday, the World Heart Day. The theme for this year is "Healthy Weight, Healthy Shape." The World Heart Day is celebrated on the last Sunday of September since 1999.

The phenomenon of global obesity is rising at an alarming rate and has become a matter of concern in both developing and developed nations.

A walkathon, organised by the All-India Heart Foundation, will be flagged off by Delhi chief minister Sheila Dikshit at 7 am on Sunday at the Shantivan. A nutrition session will be held at 3 pm at the India International Centre to increase public awareness and promote preventative measures to reduce cardiovascular disease and strokes. "We are also offering free heart check-ups for the next two weeks," says Dr S. Padmavati, president of All-India Heart Foundation.

An easy and quick way to calculate risk to health is by measuring BMI (Body Mass Index) and getting aware of weight status, according to experts. "With lead, a few extra inches at the waist may look like an occupational hazard. However, these few inches can soon dramatically turn into a life hazard," says Dr Pradeep Chowbey, chairman of the department of minimal access surgery at Sir Ganga Ram Hospital. Environmental and behavioural changes brought about by modernisation are blamed for rise in global obesity which often has fatal consequences. "Obesity is associated with more than 30 medical conditions. Weight loss of about 10 per cent of body weight in obese persons can improve some obesity-related medical conditions like diabetes, hypertension and pre-mature death," adds Dr Chowbey.

ARE YOU HEALTHY?

BMI	Weight Status
Below 18.5	Underweight
18.5 - 24.9	Normal
25.0 - 29.9	Overweight
30.0 and above	Obese

Following are the signs of increased risk to heart:

- Having a waist circumference of more than 35 inches for women and 40 inches for men (indicating highest risk of cardiovascular and metabolic disease).
- Having waist measurements of more than 34 inches for women and 39 inches for men (indicating increased risk of the diseases).

'दिल का मामला है जरा सैर पर निकलिए'

विश्व हृदय दिवस पर जगह-जगह हुए कार्यक्रम

नई दिल्ली (का.सं.)। विश्व हृदय दिवस के अवसर पर राजधानी में कई प्रकार के कार्यक्रमों का आयोजन किया गया।

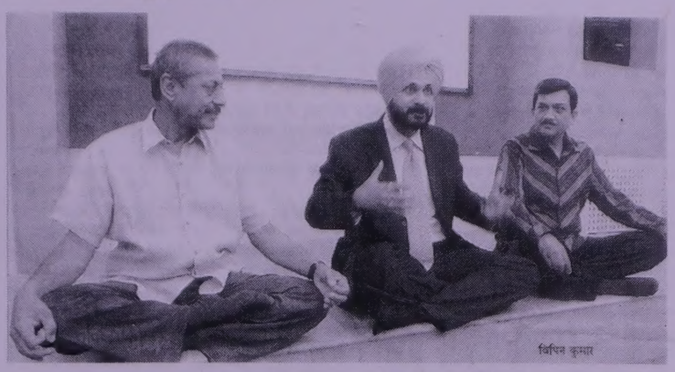
इंद्रप्रस्थ अपोलो अस्पताल की ओर से 'लाल साड़ी अभियान' को शुरुआत की गई। इस अभियान को मुख्यमंत्री शीला दीक्षित ने हरी झंडी दिखाई। अस्पताल के प्रबंध निदेशक ऐनी मेरी योनक्योर ने कहा कि यह लोगों के मन में भ्रांति है कि महिलाओं में हृदय रोग कम होते हैं जबकि सच्चाई है कि महिलाओं को पुरूषों की तुलना में अधिक हृदय रोग होते हैं। यह तीसरी ऐसी बीमारी है जिससे सर्वाधिक संख्या में महिलाएं दम तोड़ रही हैं।

आल इंडिया हार्ट फाउंडेशन और कार्डियोलाजिकल सोसायटी आफ इंडिया की ओर से शांतिवन में एक समारोह का आयोजन किया गया जिसमें एक हजार से अधिक सुबह टहलने वाले लोगों ने भाग लिया। इस मौके पर राजघाट तक एक पैदल मार्च का आयोजन किया गया जिसे शहरी विकास मंत्री डा. अशोक कुमार वालिया ने हरी झंडी दिखाई। इस आयोजन का केंद्रीय विषय वस्तु 'हेल्थी वेट-हेल्थी शेप' रखी गई। शांतिवन पर आयोजित समारोह में हार्ट सर्जन डा. पदमावती के नेतृत्व में विशेषज्ञों की एक टीम द्वारा हृदय रोग व संबंधित पहलुओं पर लोगों के प्रश्नों के जवाब दिए गए। रक्त शुगर और रक्त दाब के लिए एक नि:शुल्क शिविर का भी आयोजन किया गया।

इस मौके पर डा. वालिया ने समाज में बढ़ रहे तनाव और सुबह टहलने के फायदों के बारे में बताया। उनका मानना है कि समाज में बढ़ रहे तनाव से हृदय रोग में काफी इजाफा हुआ है। कार्यक्रम के समन्वयक डा. ए. एस. देव ने लोगों को वजन नियंत्रण करने और पौष्टिक आहार पर कई टिप्स दिए। इस मौके पर एक लकी ड्रा का आयोजन भी किया गया। सियल लिमिटेड के ए. के. मेहरा ने बताया कि कोर्नोला में पाली वसा अम्ल प्रचुर मात्रा में पाया जाता है।

मेट्रो हार्ट इंस्टीट्यूट, लाजपत नगर की ओर से एक नि:शुल्क चिकित्सा शिविर का आयोजन किया गया। इस मौके पर संस्थान के निदेशक डा. पुरूषोत्तम लाल ने कहा कि हृदय रोगों के प्रति सर्वोत्तम बचाव है। उन्होंने बताया कि आज विश्व में तकरीबन 10 से 12 मिलियन लोग हृदय रोगों की वजह से असमय मौत के शिकार हो जाते हैं। भारत में एक लाख लोगों में से 140 व्यक्तियों की मृत्यु हृदयघात से होती है। शिविर में 150 लोगों की जांच की गई। चिकित्सकों ने लोगों को भागदौड़ भरी जीवन शैली व फास्ट फूड संस्कृति से बचने की सलाह दी। उन्होंने बताया कि तनावपूर्ण जीवन और गलत खान-पान हृदय रोगों के प्रमुख कारक हैं।

मानव सेवा योग संस्था की ओर से एक जागरूकता शिविर का आयोजन किया गया। इस मौके पर योग प्राकृतिक साधनों एवं चिकित्सा द्वारा हृदय की स्वास्थ्य संबंधी जानकारियां दी गई। लोगों को लिखित सामग्री भी वितरित की गई। शिविर में डा. राकेश शर्मा, डा. धर्मवीर शर्मा, योगाचार्य निरंजन पांडेय सहित कई विशेषज्ञ उपस्थित थे।

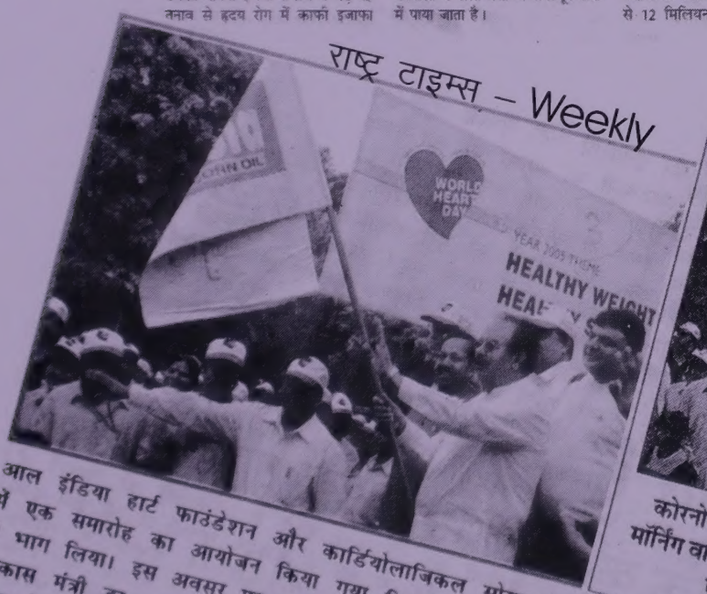


विपिन कुमार

विश्व हृदय दिवस के एक कार्यक्रम में योग करते सांसद व पूर्व क्रिकेटर नवजोत सिंह सिद्धू एस्कार्ट हार्ट इंस्टीट्यूट के कार्यकारी निदेशक डा. नरेश त्रेहन (बाएं) एवं मशहूर शेफ संजीव कपूर (दाएं)।

नियमित जांच कराएं : मुख्यमंत्री

नई दिल्ली (का.सं.)। मुख्यमंत्री शीला दीक्षित ने महिलाओं से दिल की नियमित जांच कराने की अपील की है। उन्होंने कहा कि दिल के गंभीर रोगों से बचने के लिए बीमारी का जल्दी पता चलना बहुत ही जरूरी है। मुख्यमंत्री ने कहा कि परिवार और समाज को संभालने के अलावा महिलाओं को घर और बाहर का 75 प्रतिशत काम करना पड़ता है। इस दौरान उन्हें भारी मानसिक दबाव से गुजरना पडता है जिससे महिलाएं दिल की रोगी बन जाती हैं। महिलाओं में मोटापे की वजह से भी हृदय रोग फैलता है।



कोरनोला द्वारा वर्ल्ड हार्ट डे पर शांति वन से राजघाट तक प्रायोजित मॉर्निंग वाक में एक हजार लोगों ने भाग लिया। दिल्ली के वित्त मंत्री डॉ. ए.के. वालिया इस इवेंट को फ्लैग ऑफ करते हुए।

आल इंडिया हार्ट फाउंडेशन और कार्डियोलाजिकल सोसायटी ऑफ इंडिया की ओर से शांतिवन में एक समारोह का आयोजन किया गया जिसमें एक हजार से अधिक सुबह टहलने वाले लोगों ने भाग लिया। इस अवसर पर राजघाट तक एक पैदल मार्च का आयोजन किया गया जिसे शहरी विकास मंत्री डा. अशोक कुमार वालिया ने हरी झंडी दिखाई। इस आयोजन का केन्द्रीय विषय वस्तु हेल्थी वेट-हेल्थीशेप रखी गई। शांतिवन पर आयोजित समारोह में हार्ट सर्जन डा. पदमावती के नेतृत्व में विशेषज्ञों की एक टीम द्वारा हृदय रोग व संबंधित पहलुओं पर लोगों के प्रश्नों के जवाब दिए गए। इस मौके पर डा. वालिया ने समाज में बढ़ रहे तनाव और सुबह टहलने के फायदों के बारे में बताया। उनका मानना है कि समाज में बढ़ रहे तनाव से हृदय रोग में काफी इजाफा हुआ है। इस मौके पर एक लकी ड्रा का आयोजन भी किया गया। कार्यक्रम के समन्वयक डा. ए.एस. देव ने लोगों को वजन नियंत्रण करने और पौष्टिक आहार पर कई टिप्स दिए।

Here's some good news about almonds that you can really take to heart.

Scientific evidence suggests but does not prove that eating 1.5 ounces per day of most nuts, such as almonds, as part of a diet low in saturated fat and cholesterol may reduce the risk of heart disease. See nutrition information for fat content.

So, if you love almonds for their delicious taste, great crunch and naturally nutritious personality, now you've got an exciting new reason to love them even more.

MORE GOOD NEWS TO CRUNCH ON:

ALMONDS CAN HELP LOWER CHOLESTEROL

In a recent study published in Circulation: Journal of the American Heart Association, "almonds significantly lowered bad cholesterol levels in a study of people with high cholesterol."

ALMONDS ARE AN EXCELLENT SOURCE OF VITAMIN E

Almonds are the highest natural source of alpha-tocopherol vitamin E, the form of vitamin E most preferred by our body.

A HANDFUL OF ALMONDS ARE A NUTRIENT POWERHOUSE

1 oz. (about 23 almonds) provides:

- *35% DV for vitamin E*
- *20% DV for magnesium*
- *6 grams of protein*
- *3 grams of fiber*

Plus a tasty way to get calcium, iron and other important nutrients.

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